

**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**



Declaration  
Submitted  
with Initial  
Filing

OR



Declaration  
Submitted after Initial  
Filing (surcharge  
(37 CFR 1.16 (e))  
required)

Attorney Docket Number JA-XA-977/US 1

First Named Inventor Hsi Kuang MA

COMPLETE IF KNOWN

Application Number

/

Filing Date

12/24/2001

Art Unit

Examiner Name

As the below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

EARPHONE CAPABLE OF AUTOMATICALLY RECEIVING TELEPHONE CALLS

(Title of the Invention)

the specification of which



is attached hereto

OR



was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

| Prior Foreign Application Number(s) | Country        | Foreign Filing Date (MM/DD/YYYY) | Priority                 | Certified Copy Attached? |                                     |
|-------------------------------------|----------------|----------------------------------|--------------------------|--------------------------|-------------------------------------|
|                                     |                |                                  | Not Claimed              | YES                      | NO                                  |
| 090218184                           | Taiwan, R.O.C. | 10/24/2001                       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
|                                     |                |                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
|                                     |                |                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

## DECLARATION- Utility or Design Patent Application

Direct all correspondence to: ☐ Customer Number or Bar Code Label  OR ☒ Correspondence address below

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statement is and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1 00 1 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR

☐ A petition has been filed for this unsigned inventor

Given Name  
(first and middle [if any]) **Hsi Kuang**

Family Name  
or Surname **MA**

Inventor's  
Signature *Hsi Kuang Ma*

Date **Dec. 14, 2001**

Residence: City **Taipei**

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ZIP **111**

Country **R.O.C.**

NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name  
(first and middle [if any])

Family Name  
or Surname

Inventor's  
Signature

Date

Residence: City

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Citizenship

Mailing Address

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ZIP

Country

☐ Additional inventors are being named on the ☐ supplemental Additional Inventor(s) sheet(s) P PTO/SB/02A attached hereto.

Please type a plus sign (+) inside this box ☐

PTO/SB/01 (02-01)

Approved for use through 10/31/2002. OMB 0651-0035

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# POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

|                        |   |
|------------------------|---|
| Application Number     |   |
| Filing Date            |   |
| First Named Inventor   | Hsi Kuang MA  |
| Title                  | EARPHONE CAPABLE OF AUTOMATICALLY RECEIVING TELEPHONE CALLS |
| Group Art Unit         |   |
| Examiner Name          |   |
| Attorney Docket Number |   |

I hereby appoint:

☐ Practitioners at Customer Number

OR

☒ Practitioner(s) named below:

Place Customer  
Number Bar Code  
Label here

| Name             | Registration Number |
|------------------|---------------------|
| Chauncey Johnson | 46,003              |
|                  |                     |
|                  |                     |
|                  |                     |

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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I am the:

☒ Applicant/ inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

## SIGNATURE of Applicant or Assignee of Record

Name

Hsi Kuang MA

Signature

*Hsi Kuang MA*

Date

Dec. 14, 2001

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ \*Total of forms are submitted

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